

Exhibit A

Administrative Resources

§a(1)

CITY OF SAN LEANDROCommunity Development Department • Planning Services Division
835 East 14th Street • San Leandro, CA 94577 • (510) 577-3371 • Fax: (510) 577-6007**PLANNING PERMIT
APPLICATION**

Please type or print legibly.

Project Address: 14600 Catalina St Assessor's Parcel Number: 080-G-0933-022-01

Please check all applicable permits:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Fence Modification | <input type="checkbox"/> Planned Development | <input type="checkbox"/> Site Plan Review: |
| <input type="checkbox"/> Variance | <input checked="" type="checkbox"/> Zoning Map Amendment | <input type="checkbox"/> Other _____ | Δ Major |
| <input type="checkbox"/> Parking Exception | <input type="checkbox"/> Tentative Map | | Δ Minor |
| | | | Δ RS-VP |

Please describe the project associated with your application request. (Attach additional sheets if necessary.)
Purchase and occupation of property located at 14600 Catalina, for the
purpose of a house of worship

Please provide a supporting statement for your application request. (Attach additional sheets if necessary.)

See attached sheetApplicant (☐ owner ☐ lessee ☐ other): pending ownerLegal Name (☐ individual ☒ corporation ☐ joint venture ☐ partnership): ICFG San Leandro #2Mailing Address: 577 Manor Blvd Work Phone: (510) 357 5723City: San Leandro State: CA Zip: 94579 Home Phone: (510) 656 5615Email Address (optional): sm@Faith-Fellowship.US Cell Phone: (510) 773 8500

I (We) hereby certify under penalty of perjury that I (we) join in said application and that the statements and information contained herein are in all respects true and correct.

Date: 5-11-06 Applicant's Signature: [Signature] for pastor Gary Montara

Property Owner (if the applicant is not the owner): _____

Legal Name (☐ individual ☐ corporation ☐ joint venture ☐ partnership): _____

City: _____ State: _____ Zip: _____ Home Phone: () _____

Email Address (optional): _____ Cell Phone: () _____

I (We) hereby certify under penalty of perjury that I (we) join in said application and that the statements and information contained herein are in all respects true and correct.

Date: _____ Property Owner's Signature: _____

TO BE COMPLETED BY CITY STAFF

Project #: PLN _____	Date/Received: _____ By: _____	Zoning District: _____
Reviewing Body: _____	Fee/Deposit paid: _____	Code Section: _____
Hearing Date: _____	Receipt #: _____	Redevelopment: <input type="checkbox"/> Plaza <input type="checkbox"/> Joint <input type="checkbox"/> WSL/Mac
	Customer #: _____	Environmental: <input type="checkbox"/> Exempt <input type="checkbox"/> Neg Dec <input type="checkbox"/> EIR

Staff Comments: _____